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Letter to the Editor

SARS-CoV-2: a general recommendation to adhere to government regulations cannot be evidence-based



Sir,

We appreciate the systematic analysis of scientific evidence on the routes of severe acute respiratory syndrome coronavirus-2 (SARS-CoV-2) transmission and the effect of preventive measures published by Bak et al., resulting in some general and specific recommendations [1]. After a careful compilation of scientific evidence, the authors recommend that the general population should 'adhere to regulations currently imposed by your government'. This general recommendation is, from our point of view, not evidence-based, as the authors fail to provide a single study to show that adhering to government regulations significantly reduces the number of COVID-19 cases, especially when the frequent changes in regulations and local peculiarities are taken into account. The international readership of this journal may also question this general recommendation and may regard it as quite unbalanced.

An example from Germany may help to explain our concern. The use of face masks in public was regarded as unnecessary in January 2020. Three months later, however, it was implemented that people should wear a face mask of any type in shops and on public transport. In January 2021, it was made compulsory to wear a surgical mask or an FFP2 mask in shops and on public transport. In April 2021, the rules were changed again so that people had to wear an FFP2 mask on local public trains or buses. It is obvious that these fast and incomprehensible changes in regulations cannot be supported by sound scientific evidence because evidence is lacking [2]. Is it better for the public to follow the scientific evidence as described by Bak et al. ['There is no evidence which suggests that respirator masks (e.g. N95, FFP2/3) offer additional protection outside the healthcare settings'] and use any type of mask or maybe no mask at all when the local government imposes the use of FFP2 masks, or should the public follow the official regulations even where is no convincing evidence to support it nor any expected health benefit? Another aspect of concern is that government regulations only look at the expected health benefits of a measure to control the spread of SARS-CoV-2, and do not weigh this against its associated health risks or its negative effect on many short-term and long-term health outcomes [3]. The government lockdowns in the UK will probably result in substantial increases in the number of avoidable cancer deaths in England as a result of diagnostic delays [4]. The national lockdown also led to a significant decrease in acute stroke admissions and transient ischaemic attack evaluations at a stroke centre [5]. These two examples show that some governmental measures can have major health consequences beyond coronavirus disease 2019. As such, we clearly refute the general recommendation in any evidence-based guideline to simply adhere to regulations imposed by a government. The scientific community should never stop questioning government regulations, although this does seem to be more difficult and risky at the present time [6].

## Conflict of interest statement

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> G. Kampf<sup>a,\*</sup> M. Esfeld<sup>b</sup>

<sup>a</sup>University Medicine Greifswald, Institute for Hygiene and Environmental Medicine, Greifswald, Germany <sup>b</sup>University of Lausanne, Department of Philosophy, Lausanne, Switzerland

\* Corresponding author. Address: University Medicine Greifswald, Institute for Hygiene and Environmental Medicine, Ferdinand-Sauerbruch-Strasse, 17475 Greifswald, Germany. E-mail address: guenter.kampf@uni-greifswald.de (G. Kampf)

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